

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
(FOR USE WITH FORM PTO-875)

SERIAL NO.

**10/540227**

FILING DATE

**Washington/Aurora**

**National Stage Processing**

**Patented Specialist**

**(705) 305-8421**

APPLICANT(S)

**CLAIMS**

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		2		2		
4		2		2		
5		2		2		
6		2		2		
7		2		2		
8		2		2		
9		2		2		
10		2		2		
11		2		2		
12		2		2		
13		2		2		
14		2		2		
15		2		2		
16		2		2		
17		2		2		
18		2		2		
19		2		2		
20		2		2		
21	1		1			
22		2		2		
23		2		2		
24		2		2		
25		2		2		
26		2		2		
27		2		2		
28		2		2		
29		2		2		
30		2		2		
31		2		2		
32	1		1			
33		1		1		
34		1		1		
35		3		3		
36		3		3		
37	1		1			
38		1		1		
39		1		1		
40		3		3		
41		2		2		
42		2		2		
43		2		2		
44		2		2		
45	1					
46		2		2		
47		2		2		
48			1			
49				2		
50				2		
TOTAL IND.		↓	↓	↓	↓	↓
TOTAL DEP.	↓	6	↓	46	↓	↓
TOTAL CLAIMS	↓	52	↓		↓	↓

	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52			1			
53				1		
54						
55						
56						
57						
58						
59						
60						
61						
62						
63						
64						
65						
66						
67						
68						
69						
70						
71						
72						
73						
74						
75						
76						
77						
78						
79						
80						
81						
82						
83						
84						
85						
86						
87						
88						
89						
90						
91						
92						
93						
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.		↓	↓	↓	↓	↓
TOTAL DEP.	↓		↓		↓	
TOTAL CLAIMS	↓		↓		↓	